

EMPLOYMENT APPLICATION TOWN OF HERNDON, VIRGINIA

HUMAN RESOURCES OFFICE

Mailing Address: P.O. BOX 427, HERNDON, VIRGINIA 20172-0427

Street Address: 777 LYNN STREET, ROOM 110, HERNDON, VIRGINIA 20170-4602

Office (703) 435-6817 TDD (703) 435-6817 Fax (703) 787-7325

Please print in ink or type. Answer every question clearly and completely. Where a question does not apply, answer N/A. Completed applications may be mailed or hand-delivered. The Human Resources Office must receive applications for positions with closing dates by 5:00 p.m. on the closing date.

PERSONAL DATA

Applications are only accepted for jobs that are currently open. Be sure to list the title of the job you are applying for.

JOB APPLIED FOR _____
(Give exact title)

1. Name _____ 2. Social Security No. _____
Last First Middle

3. Address _____
Street City State Zip Code

4. Telephone, Area Code/Number (_____) _____ (_____) _____
Home Work

5. Are you legally eligible to work in the U.S.? ☐ Yes ☐ No

6. The Town of Herndon supports the Americans with Disabilities Act. Will you require any reasonable accommodation in order to complete the interview process? ☐ Yes ☐ No If yes, list **only** accommodation needed:

7. Have you ever worked for the Town of Herndon? ☐ Yes ☐ No

If yes, which department? _____ When? _____

8. Do you have a valid driver's license? ☐ Yes ☐ No If yes, State _____ Number _____

Valid Commercial driver's license? ☐ Yes ☐ No If yes, State _____ Number _____

Driving records must be provided prior to hire for those positions that require driving a Town vehicle and are therefore included on the Town's insurance policy. Acceptable records must be within the standards set by the insurance company and the Town.

9. When would you be available for employment? _____

10. What is the lowest starting salary you will accept? _____

11. How did you learn about the job for which you are applying? _____

If newspaper, which one, or if Town employee referral, list name of employee. _____

EDUCATION AND TRAINING

12. Indicate the highest educational grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Undergraduate _____ Graduate _____ Ph.D. _____

Name and location of the last high school attended_____

Did you graduate from high school? ☐ Yes ☐ No If not, have you passed a G.E.D. test? ☐ Yes ☐ No

	School Name and Location	From	To	Date Graduated	Degree	Major Area of Study
College or University						
Other Education						

SPECIAL QUALIFICATIONS AND SKILLS (typing, computer proficiency, foreign languages, professional licenses and certificates, publications, scholastic honors, etc.)

OTHER TRAINING YOU RECEIVED (for example, special courses, work training programs, armed forces training)

If applying for a job requiring specific skills, please complete as applicable:

Typing Speed_____ wpm Other_____

EXPERIENCE HISTORY

13. Start with your present job and work back. Include military service and volunteer experience. Additional experience should be listed on separate sheets of paper or a personal resume. Be sure to include all requested information, especially as it relates to the job for which you are applying.

A. Present Employer _____ From _____ To _____

Address _____ Telephone _____ Avg.Hrs./Week _____

Job Title _____ Starting Salary _____ Ending _____

Supervisor's Name _____ May we contact? ☐ Yes ☐ No

Reason for Leaving _____

Describe your work _____

B. Previous Employer _____ From _____ To _____

Address _____ Telephone _____ Avg.Hrs./Week _____

Job Title _____ Starting Salary _____ Ending _____

Supervisor's Name _____ May we contact? ☐ Yes ☐ No

Reason for Leaving _____

Describe your work _____

C. Previous Employer _____ From _____ To _____

Address _____ Telephone _____ Avg.Hrs./Week _____

Job Title _____ Starting Salary _____ Ending _____

Supervisor's Name _____ May we contact? ☐ Yes ☐ No

Reason for Leaving _____

Describe your work _____

D. Previous Employer _____ From _____ To _____

Address _____ Telephone _____ Avg.Hrs./Week _____

Job Title _____ Starting Salary _____ Ending _____

Supervisor's Name _____ May we contact? ☐ Yes ☐ No

Reason for Leaving _____

Describe your work _____

14. Background checks are routinely performed prior to hire. May we conduct? ☐ Yes ☐ No

If no, please explain:

15. Have you ever been convicted of any offense against the law? Omit juvenile offenses and minor traffic violations. Include convictions by general court martial while in the military services. ☐ Yes ☐ No

If yes, please explain (A conviction does not automatically mean that you cannot be employed. The charge and the date are important. Give all of the facts so that a decision can be made.):

16. References may be furnished in the space provided below if desired by applicant.

_____ Name	_____ Name	_____ Name
_____ Address	_____ Address	_____ Address
_____ Telephone	_____ Telephone	_____ Telephone
_____ Relationship	_____ Relationship	_____ Relationship

ATTENTION: THIS STATEMENT MUST BE SIGNED.

I certify that all of the statements made in this application are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not employing me or dismissing me after I have begun work. I understand that all information contained in this application may be subject to verification.

For certain job categories, I may be required to pass, after a conditional offer of employment is made, a physical examination to establish ability to perform the essential functions of the job. I authorize the Town of Herndon to conduct a criminal history check of my record. I understand that any offer of employment is conditioned upon the Town's concurrence, before or after such offer is made, that the results of the criminal history check are consistent with the Town's employment standards or expectations for the job for which I am applying.

Signature of Applicant

Date

THANK YOU FOR MAKING APPLICATION FOR EMPLOYMENT WITH THE TOWN OF HERNDON

An Equal Opportunity Employer

VOLUNTARY DATA RECORD

To enable the Town of Herndon to meet statistical reporting regulations, applicants are requested (but not required) to complete this Personal Data Sheet. Information will be used solely for reporting purposes. This portion of your application will be detached and, if hired, will not become a part of your employee record. It will not be used as selection criteria and will be treated as personal and confidential.

Name: _____ Date: _____

Position applied for: _____

Date of Birth: _____ Check one: ☐ Male ☐ Female

Check one of the following (race/ethnic category descriptions are on the reverse side of this form):

☐ White ☐ Black ☐ Hispanic ☐ Native American ☐ Asian/Pacific Islander

Are you a Veteran? ☐ No ☐ Yes Vietnam Era Veteran? ☐ No ☐ Yes

If yes, dates of active duty: From _____ To _____

Type of discharge or release: _____

TO ALL APPLICANTS

Section 503 of the Rehabilitation Act of 1973, the Americans With Disabilities Act and Section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974, as amended, provide for employers to take affirmative action to employ and advance qualified disabled individuals, qualified disabled veterans, and veterans of the Vietnam Era respectively. If you would like to be considered under any of these Affirmative Action programs, please complete the information below.

Submission of this information is voluntary and refusal to provide it will not prevent consideration of employment.

Your information will be kept confidential and used only for the purpose of the Acts and the regulations issued under them, except (a) Supervisors and managers may be informed regarding restrictions on your work or duties and necessary accommodations; (b) safety personnel may be informed, as appropriate, if the condition might require emergency treatment; and (c) government officials investigating compliance with the Acts shall be informed.

If you are disabled and/or a veteran of the Vietnam Era, we would like to assist you in making appropriate career decisions. It would be helpful if you would complete the information below.

☐ I am disabled and would like assistance in appropriate employment placement.

☐ I am a Vietnam Era Veteran and would like assistance in appropriate employment placement.

☐ I am a disabled veteran and would like assistance in appropriate employment placement.

This is a list of my special skills, knowledge, or experience, which may qualify me for positions that I might not otherwise be able to do because of my disability. This will permit my being considered for any position of that kind:

The following accommodations, if made, would enable me to perform the job for which I am applying successfully and safely:

RACE/ETHNIC CATEGORY DESCRIPTIONS

White (not of Hispanic origin)

All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Black (not of Hispanic origin)

All persons having origins in any of the Black, racial groups of Africa.

Hispanic

All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

Asian or Pacific Islander

All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, India, Korea, the Philippine Islands, and Samoa.

American Indian or Alaskan Native

All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.